



1 7-9-81.1 NMSA 1978 for the month by taxpayers from business  
2 locations attributable to the municipality multiplied by the  
3 sum of the combined rate of all municipal local option gross  
4 receipts taxes in effect in the municipality for the month plus  
5 one and two hundred twenty-five thousandths percent.

6 B. For the purposes of this section, "business  
7 locations attributable to the municipality" means business  
8 locations:

9 (1) within the municipality;

10 (2) on land owned by the state, commonly known  
11 as the "state fair grounds", within the exterior boundaries of  
12 the municipality;

13 (3) outside the boundaries of the municipality  
14 on land owned by the municipality; and

15 (4) on an Indian reservation or pueblo grant  
16 in an area that is contiguous to the municipality and in which  
17 the municipality performs services pursuant to a contract  
18 between the municipality and the Indian tribe or Indian pueblo  
19 if:

20 (a) the contract describes an area in  
21 which the municipality is required to perform services and  
22 requires the municipality to perform services that are  
23 substantially the same as the services the municipality  
24 performs for itself; and

25 (b) the governing body of the

1 municipality has submitted a copy of the contract to the  
 2 secretary. "

3 Section 2. A new section of the Gross Receipts and  
 4 Compensating Tax Act, Section 7-9-81.1 NMSA 1978, is enacted to  
 5 read:

6 "7-9-81.1. [NEW MATERIAL] DEDUCTION--GROSS RECEIPTS--  
 7 CERTAIN RECEIPTS FROM SERVICES PROVIDED BY LICENSED HEALTH  
 8 PRACTITIONERS. --

9 A. Receipts from payments by managed health care  
 10 providers and health care insurers for the commercial portion  
 11 of contract services provided by a licensed health practitioner  
 12 may be deducted from gross receipts.

13 B. As used in this section:

14 (1) "commercial portion of contract services"  
 15 means services performed pursuant to a contract with a managed  
 16 health care provider or a health care insurer other than those  
 17 provided for medicare patients pursuant to Title 18 of the  
 18 federal Social Security Act or for medicaid patients pursuant  
 19 to Title 19 or Title 21 of the federal Social Security Act;

20 (2) "health care insurer" means a person that:

21 (a) has a valid certificate of authority  
 22 in good standing pursuant to the New Mexico Insurance Code to  
 23 act as an insurer, health maintenance organization, nonprofit  
 24 health care plan or prepaid dental plan; and

25 (b) contracts to reimburse licensed

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underscored material = new  
 [bracketed material] = delete

1 health care practitioners for providing basic health services  
2 to enrollees at negotiated fee rates;

3 (3) "licensed health practitioner" means:

4 (a) a chiropractic physician licensed  
5 pursuant to the provisions of the Chiropractic Physician  
6 Practice Act;

7 (b) a dentist or dental hygienist  
8 licensed pursuant to the provisions of the Dental Health Care  
9 Act;

10 (c) a physician or physician assistant  
11 licensed pursuant to the provisions of Chapter 61, Article 6  
12 NMSA 1978;

13 (d) an osteopathic physician licensed  
14 pursuant to the provisions of Chapter 61, Article 10 NMSA 1978  
15 or an osteopathic physician's assistant licensed pursuant to  
16 the provisions of the Osteopathic Physicians' Assistants Act;

17 (e) a doctor of oriental medicine  
18 licensed pursuant to the provisions of the Acupuncture and  
19 Oriental Medicine Practice Act;

20 (f) a podiatrist licensed pursuant to  
21 the provisions of the Podiatry Act;

22 (g) a psychologist licensed pursuant to  
23 the provisions of the Professional Psychologist Act;

24 (h) a registered nurse or licensed  
25 practical nurse licensed pursuant to the provisions of the

1 Nursing Practice Act;

2 (i) a registered lay midwife registered  
3 by the department of health;

4 (j) a physical therapist licensed  
5 pursuant to the provisions of the Physical Therapy Act;

6 (k) an optometrist licensed pursuant to  
7 the provisions of the Optometry Act;

8 (l) a registered occupational therapist  
9 licensed pursuant to the provisions of the Occupational Therapy  
10 Act;

11 (m) a respiratory care practitioner  
12 licensed pursuant to the provisions of the Respiratory Care  
13 Act;

14 (n) a clinical laboratory accredited  
15 pursuant to 42 USCA 263a; and

16 (o) a speech-language pathologist or  
17 audiologist licensed pursuant to the Speech-Language Pathology,  
18 Audiology and Hearing Aid Dispensing Practices Act; and

19 (4) "managed health care provider" means a  
20 person that provides for the delivery of comprehensive basic  
21 health care services and medically necessary services to  
22 individuals enrolled in a plan through its own employed health  
23 care providers or by contracting with selected or participating  
24 health care providers. "Managed health care provider" includes  
25 only those persons that provide comprehensive basic health care

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1 services to enrollees on a contract basis, including the  
2 following:

- 3 (a) health maintenance organizations;
- 4 (b) preferred provider organizations;
- 5 (c) individual practice associations;
- 6 (d) competitive medical plans;
- 7 (e) exclusive provider organizations;
- 8 (f) integrated delivery systems;
- 9 (g) independent physician-provider  
10 organizations;
- 11 (h) physician hospital-provider  
12 organizations; and
- 13 (i) managed care services  
14 organizations. "

15 Section 3. EFFECTIVE DATE. --

16 A. The effective date of the provisions of Section  
17 1 of this act is August 1, 2004.

18 B. The effective date of the provisions of Section  
19 2 of this act is July 1, 2004.